PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEÉ
Commissioner for Patents

P.O. Box 1450 Alexandria, Virginia 22313-1450

MAR 1-3 2007

or <u>Fax</u> (571)-273-2885

							POADS VOICE	
INSTRUCTIONS: This appropriate. All further indicated unless corrected maintenance fee notifications.	form should be used correspondence includied below or directed ottions.	for transmitting the ISS ng the Patent, advance of herwise in Block 1, by	UE FEE and PUBLICATI orders and notification of r (a) specifying a new corres					
CURRENT CORRESPOND	ENCE ADDRESS (Note: Use B	E	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
21171	7590 02/22	1147						
	RK AVENUE, N.W	7.	I he Stat addı tran	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.				
WASHINGTON	i, DC 20005						(Depositor's name	e)
							(Signature	ε)
•							(Date	e)
APPLICATION NO.	FILING DATE	<u> </u>	FIRST NAMED INVENTOR		ATTORNEY DOCK	KET NO.	CONFIRMATION NO.	
10/686,670	10/17/2003		Shota Mori		1614.1368	3	8269	
TITLE OF INVENTION	: WAVELENGTH MU	LTIPLEXING METHOD	AND AN APPARATUS T	THEREOF				
				93/15	/2007 HMARZI2	86699999	10686670	
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAIDESSE	TOTAL FI	EE(S) DUE	1480.00 07 300 TEAPUE	٦
nonprovisional	NO	\$1400	\$300	\$0	\$1.	700	05/22/2007	_
EXAMINER ART UNIT		CLASS-SUBCLASS						
SEDIGHIAN, REZA 2613		398-079000	J					
1. Change of corresponde CFR 1.363).	ence address or indication	on of "Fee Address" (37	2. For printing on the p	atent front page, lis	st	CMA A C	& HALSEY L	— т D
Crk 1.303). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			(1) the names of up to or agents OR, alternative	vely,	it attorneys	SIAAS	& HALSEI II	ΉE
The Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
3. ASSIGNEE NAME A	ND RESIDENCE DAT.	A TO BE PRINTED ON	THE PATENT (print or typ	pe)				_
PLEASE NOTE: Unl recordation as set fort	ess an assignee is ident h in 37 CFR 3.11. Com	tified below, no assignee pletion of this form is NO	e data will appear on the pa OT a substitute for filing an	atent. If an assign assignment.	ee is identified bel	ow, the do	cument has been filed for	or
(A) NAME OF ASSIG	GNEE		(B) RESIDENCE: (CITY and STATE OR COUNTRY)					
Fujitsu Li	mited		Kawasa	ki, Japar	מ	•		
Please check the appropri	iate assignee category or	r categories (will not be p	printed on the patent):	Individual 🛣 Co	orporation or other p	private grou	up entity Governmen	nt
4a. The following fee(s)	are submitted:	4	b. Payment of Fee(s): (Plea	se first reapply a	ny previously paid	issue fee s	hown above)	
Issue Fee	•		XX A check is enclosed.					
Publication Fee (N	lo small entity discount	permitted)	Payment by credit card. Form PTO-2038 is attached.					
Advance Order - #	of Copies		The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 19-3935 (enclose an extra copy of this form).					
	tus (from status indicate	•						
	s SMALL ENTITY state		☐ b. Applicant is no long	<u> </u>				_
NOTE: The Issue Fee and nterest as shown by the r	d Publication Fee (if req records of the United Sta	uired) will not be accepte ites Patent and Trademar	ed from anyone other than the Office.	he applicant; a regi	stered attorney or a	gent; or the	e assignee or other party i	in —
Authorized Signature	M	of trans		Date	Karch 1	3,20	7	
Typed or printed name Paul I. Kravetz				Registration N	To. 35,	230		
This collection of information application. Confident	ation is required by 37 Chiality is governed by 35	CFR 1.311. The information U.S.C. 122 and 37 CFR	on is required to obtain or r 1.14. This collection is est	etain a benefit by t imated to take 12 r	he public which is t	o file (and e, including	by the USPTO to process gathering, preparing, an	s) id

submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.